Other

b. 🔀 Enclosed

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Information Disclosure Statement (IDS)

Modified PTO/SB/30 (10-01)
Approved for use through 10/31/2002. OMS 0651-0031
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REQUEST

FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop 313c Commissioner for Patents P.O. Box 1450 Alexandia, VA 22313-1450

DIBECTION OF INIOCHMETION UNICESS IC	displays a valid diffe district fields
Application Number	10/749,110
Filing Date	December 29, 2003
First Named Inventor	Chad LESTER
Art Unit	2446
Examiner Name	Willow W. Noonan
Attorney Docket Number	Google-33/APP (GP-086-00-US)

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8. 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2. Submission required under 37 CFR 1.114 Previously submitted Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on (Any unentered amentment(s) referred to above will be entered).

Consider the arguments in the Appeal Brief or Reply Brief previously filed on

ii. Affidavit(s)/Declaration(s)	•	iv.	Other		-
Miscellaneous			 · 	noted under 37 CEP 1	103/c) for:

a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(I) required) transmittaliand fee transmittal b. X Other

	The RCE fee under 37 (FR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
a. 🛛	Fhe Director is herdby authorized to charge the following fees, any underpayment or credit any overpayment of the following fees to Deposit Account No. <u>50-1049</u>

RCE fee required under 37 CIFIR 1.17(e) Extension of time fee (37 CFR 1.136 and 1.17)

b. Check in the amount of \$ _____ enclosed

C. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

	SIGNATURE OF APPLICAN	T, ATTORNEY, OR A	GENT REQUIRED	Carlotte State	
Name (PrintIType)	John C. Pokotylo	Regi	stration No. (Attorney/Agent)	36,242	
Signature	alen C. Johotal	U Date	March 13, 2009		

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

John C. Pokotylo Name (Print/Type) March 13, 2009 Date \$ignature

Burden Hour Statement: This form is stimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be earl to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Mail Stop 313c, Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450.

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